

MEMBER WIRE OUT TRANSFER REQUEST

Fax to 770-582-3877 or bring in person.

Please print. All information must be filled out completely by the member wiring funds.

<i>DATE</i>		<i>TIME</i>	
<i>Member Name:</i>		<i>EXCEL Acct No.</i>	
<i>Address:</i>		<i>Telephone:</i>	

Check one: (Account funds will be removed from)

<i>Savings</i>		<i>Checking</i>		<i>Money Market</i>		<i>Redi-Cash</i>	
<i>Amount:</i>							

Wires exceeding 1,000.00 - A current valid copy of your driver's license must be submitted with this request.

Wires are \$12.00. Cut off time is 3:30 PM daily

Some institutions do not have the ability to accept wires direct. They require their wires to be sent through another financial institution. If this is the case, you must fill out parts A, B, and C. If your bank receives wires direct, then fill out only A and C.

Part C must be filled out COMPLETELY

A. FIRST BANK YOU ARE SENDING TO:

<i>Receiving Bank:</i>			
<i>City & State:</i>			
<i>ABA /ROUTING</i>		<i>Telephone</i>	

B. FOR FURTHER CREDIT: (SECOND BANK or SECOND ACCOUNT OPTIONAL)

<i>Financial Institution:</i>			
<i>City & State:</i>			
<i>ACCT#</i>		<i>Telephone</i>	

C. FOR FINAL: (WHO IS RECEIVING THE FUNDS) YOU MUST COMPLETE THIS SECTION.

<i>Name on Account:</i>		<i>Account Number:</i>	
<i>Address of Recipient:</i>		<i>City, Country</i>	
		<i>Phone:</i>	

SPECIAL INFORMATION: (OPTIONAL)

Two signatures by you are required:

<i>Your Signature</i>		<i>Your signature again</i>	
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